

GENERAL INFORMATION

TOWN OF BLOWING ROCK ZONING PERMIT APPLICATION

Department of Planning and Inspections PO Box 47, Blowing Rock, North Carolina 28605 828-295-5240 Fax 828-295-5202

www.townofblowingrocknc.gov email: planning@townofblowingrocknc.gov

Boxes checked by staff indicate to be completed by applicant. Fill in all blanks. Enter N/A if not applicable.

Pin#Project Name				
Project Location Zoning District				
Property OwnerPhone:				
Property Owner Email:				
Property Owner <u>Mailing</u> Address				
Applicant Name: Phone:				
Applicant Email:				
Applicant Mailing Address:				
□ ZONING PERMIT				
Application for: ☐ New Construction ☐ Change in Use ☐ Addition ☐ Other				
Previous Use Proposed Use				
Existing Building Sq. Footage Proposed Bldg. Sq. Footage				
Existing Height Proposed Height				
Description of Improvements:				
Estimated Project Cost \$				
□ SHORT-TERM RENTAL USE				
If the property is changing use to function as a short-term rental, please provide the following information:				
TOTAL number of units: TOTAL number of bedrooms per unit:				
STR Operator:				
STR Operator Mailing Address:				
Phone # : Email:				
STR Operator Signature Date:				

Show property lines and setback areas for project Dimensions of proposed project and distance from setback lines All street and driveway connections Any other features of property (detached garage, sheds, streams, springs, etc.) The location and proposed height of all retaining walls (Note: Retaining walls over six (6) feet in height are not allowed in the side/rear setbacks and the wall may not exceed four (4) feet in height within the street setback. Retaining walls which exceed five (5) feet in height must be designed by a licensed professional engineer.) GRADING PLAN (if applicable): Contours (existing and proposed) Drainage, structures, culverts, etc. Narrative explaining timing, and grading and construction sequence Limits of disturbance Erosion Control Measures GHORT-TERM RENTAL INORMATION (if applicable): Need proof of parking plan for property (contracts, variance approvals, etc.) A short-term rental must have one space provided for EACH bedroom — please provide a site plan that shows the designated parking spaces or documentation of any off-site parking for STR.	GRADING COMPLIANCE/FLOOD PLAIN COMPLIANCE				
Address: Mobile Phone #	GRADING:				
Mobile Phone #	Person responsible for land disturbing activity:				
Mobile Phone #	Address:				
Size of disturbed area: Square Feet or Acres FLOOD PLAIN: Is there a stream on the property? Obes project include a stream crossing? YES NO Culvert? Bridge? Other?					
FLOOD PLAIN: Is there a stream on the property? Stere a stream on the property? YES NO Culvert? Bridge? Other?					
Required to be submitted at time of application: ITE PLAN (if applicable): Show property lines and setback areas for project Dimensions of proposed project and distance from setback lines All street and driveway connections Any other features of property (detached garage, sheds, streams, springs, etc.) The location and proposed height of all retaining walls (Note: Retaining walls over six (6) feet in height are not allowed in the side/rear setbacks and the wall may not exceed four (4) feet in height within the street setback. Retaining walls which exceed five (5) feet in height must be designed by a licensed professional engineer.) STAFING PLAN (if applicable): Contours (existing and proposed) Drainage, structures, culverts, etc. Narrative explaining timing, and grading and construction sequence Limits of disturbance Erosion Control Measures HHORT-TERM RENTAL INORMATION (if applicable): Need proof of parking plan for property (contracts, variance approvals, etc.) A short-term rental must have one space provided for EACH bedroom – please provide a site plan that shows the designated parking spaces or documentation of any off-site parking for STR. Spon issuance of this permit, I/we agree to conform to all applicable town ordinances, zoning regulations, and the laws of the State of foorth Carolina regulating such work and to the specifications of plans submitted. I/we hereby guarantee that the above information is occurate and correct to the best of my/our knowledge. Applicant (Printed) Applicant (Signature) Date STAFF USE ONLY	Is there a stream on the property? Does project include a stream crossing? Is property in a Special Flood Hazard area? Is property in a Floodway Zone? Will project involve a stream channel relocation?	() YES () NO Culvert? Bridge? () YES () NO Zone? Pai () YES () NO () YES () NO	Other? nel?		
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	Zoning Permit:#\$		t/Check #		